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396169

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



FORM D

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

SÉCTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

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bours per form		
Expires: Estimated average	hurden	
CMB Number	3235-0076	

OMB APPROVAL

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)			
Private Placement - Membership Interest Shares- Memorandum dated April 2, 2007			
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6)	ULOE PROCESSED		
Type of Filing: ☑New Filing ☐ Amendment	APR 1 3 2007		
A. BASIC IDENTIFICATION DATA	FURNISAN		
1. Enter the information requested about the issuer	THOMSON		
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.) Fulton Partners, LLC	FINANCIAL		
Address of Executive Offices (Number and Street, City, State, Zip Code) 5350 S. Roslyn Street # 400, Greenwood Village, CO 80111	Telephone Number (including Area Cod (303) 488-4707		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (including Area Code)		
Brief Description of Business Securities Investment			
Type of Business Organization			
corporation limited partnership, already formed	☑ other (please specify):		
business trust limited partnership, to be formed	limited liability company		
Actual or Estimated Date of Incorporation or Organization: O3 O3 O4 O5 O5 O6 O6 O7 O7 O7 O7 O7 O7 O7 O7	☐ Estimated		

GENERAL INSTRUCTIONS

Federal:

State:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below, or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

PROCESSED

APR 1 3 2007

THOMSON FINANCIAL



This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

iling of a fede	eral notice.					
			A. BASIC IDENTIFICA	TION DATA		
x x x	Each promoter of th Each beneficial own securities of the issu Each executive office	ner having the power t ner;	porate issuers and of cor	in the past five years; ect the vote or disposition porate general and mana		
Check Box(es)		Promotor	☐Beneficial Owner	☐ Executive Officer	Director	図General and/or Managing Partner
GGF, LL	ast name first, if ind	bility company				
		Number and Street, Ci nwood Village, CO				
Check Box(es)) that Apply:	Promotor	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (L	ast name first, if ind	ividual)				
Business or Re	esidence Address (1	Number and Street, Ci	ty, State, Zip Code)			
Check Box(es)) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (L	ast name first, if ind	ividual)				
Business or Re	esidence Address (1	Number and Street, Ci	ty, State, Zip Code)			
Check Box(es)) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (L	ast name first, if ind	ividual)				
Business or Re	esidence Address (1	Number and Street, Ci	ty, State, Zip Code)			
Check Box(es)) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (L	ast name first, if ind	ividual)				
Business or Re	esidence Address (1	Number and Street, Ci	ty, State, Zip Code)			
Check Box(es)) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (L	ast name first, if ind	lividual)		•		
Business or Re	esidence Address (1	Number and Street, Ci	ty, State, Zip Code)			
Check Box(es)) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (L	ast name first, if ind	ividual)				
Business or Re	esidence Address (1	Number and Street, Ci	ty, State, Zip Code)			
Check Box(es)) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (L	ast name first, if ind	lividual)				amging . willion

SEC 1972 (6-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Business or Residençe Address	(Number and Street, City, State, Zip Code)			
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			•	B. II	NEORMA	TION ABO	OUT OFFI	ERING				
												Yes No
1. Has the	issuer sold.	or does the	e issuer inte	nd to sell, t	o non-accre	dited invest	tors in this c	offering?				
			Ansv	ver also in A	Appendix, C	Column 2, it	f filing unde	r ULOE.				
2. What i	s the minim	um investn	ent that wi	II be accept	ed from any	individual	?					\$100,000
3. Does t	he offering	permit joint	t ownership	of a single	unit?				••••••	***************************************	***************************************	Yes No
remune person	he informat eration for s or agent of) persons to	olicitation of a broker or	of purchases dealer regis	rs in connect stered with	tion with sa the SEC an	iles of secu d/or with a	rities in the state or stat	offering. It	f a person to name of the	be listed is broker or d	an associ ealer. If п	ated nore than
Full Name	(Last name	first, if ind	ividual)					-				
Business o	r Residence	Address (1	Number and	Street, Cit	y, State, Zip	Code)				·		···
Name of A	Associated B	roker or De	ealer									
States in W	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
	"All States"				o somen r u	remusers						☐ All States
[AL]	AK	[AZ]	AR	[CA]	[CO]	CT	[DE]	DC]	[FL]	[GA]	[HI]	[ID]
	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	MS	[MO]
MT RI]	NE SC	[NV] { SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	NY VT	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	OR WY	[PA] PR]
•	(Last name	-		(* * *)	(01)	1 * * 1	1,	(****)	1 ** * 1	(***)	1 ,	1
Business o	r Residence	Address (1	Number and	l Street, Cit	y, State, Zip	Code)						
Name of A	Associated E	Broker or De	ealer									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Check	"All States"	or check in	ndividual St	ates)								☐ All States
AL	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[111]	_ [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	LA]	[ME]	[MD]	[MA]	[MI]	MN	[MS]	[MO]
[MT [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	NJ TX	NM	NY	[NC] [VA]	ND WA	[OH] [WV]	OK WI	[OR] [WY]	PA PR
Full Name	(Last name	first, if ind	lividual)			•					•	_
Business o	or Residence	Address (1	Number and	Street, Cit	y, State, Zip	Code)				<u>.</u>		
Nome of A	Associated E	Prokon on De	anlar						 			
	ASSOCIATED E											
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
•	"All States"			ates)								All States
AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	DE]	[DC]	[FL]	[GA]	[HI]	ID MO
[IL] [MT]	[IN] [NE]	[IA] [NV]	KS NH	KY NJ	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	MO PA
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	ROC	EEDS		
I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. "zero." If the transaction is an exchange offering, check this box: and indicate in the columns below				
	for exchange and already exchanged.				
	Type of Security		Aggregate fering Price		ount Already Sold
	Debt;	\$	-0-	\$	-0
	Equity:	s	4,050,000	0 \$	-0-
	• •	⊸-	4,020,00	<u>, , , , , , , , , , , , , , , , , , , </u>	
	⊠ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	\$	-0-
	Partnership Interests	\$	-0-	\$	-0-
	Other (Specify)	\$	-0-	\$	-0-
	Total			~	
		⊅_	4,050,000	<u> </u>	-0-
	\cdot				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this of				
	amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	purct	iased securi	ities and t	ne aggregate
			Number		aggregate lar Amount
			Investors		Purchases
	Accredited Investors		0	\$	-0-
	Non-accredited Investors		0	S	0
			-		
			N/A	\$	N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securitie	s solo	l by the issu	ier, to dat	e, in
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this of	ferin	g. Classify	securities	by type
	listed in Part C-Question 1.				
			Type of	Dol	lar Amount
	Type of offering		Security		Sold
	Rule 505	\$	N/A	\$	N/A
	Regulation A	\$	N/A	\$	N/A
	Rule 504	\$	N/A	\$	N/A
	Total	\$	N/A	\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securi relating solely to organization expenses of the issuer. The information may be given as subject to fut expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			□\$	-0-
	Printing and Engraving Costs			□ \$	-0-
	Legal Fees			□ - ⊠\$_	10,000
	Accounting Fees			\$	-0-
	Engineering Fees			<u></u> \$	-0-
	Sales Commissions (specify finders' fees separately)			□\$	-0-
	Other Expenses (identify)			□ \$ 図 \$	10,000
	1 VWI		************		10,000

	b. Enter the difference between the aggregate offering	g price given in response to Part C - Ques	tion 1 a	and to	tal expenses	furnish	ed in
	response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."					\$ <u>4,04</u>	0,000
5,	Indicate below the amount of the adjusted gross proc amount for any purpose is not known, furnish an esti equal the adjusted gross proceeds to the issuer set for	mate and check the box to the left of the e	stimate				
	equal the adjusted gross proceeds to the issuer set for	ui in response to ran C - Question 4.6 ao	ove.	(Di	yments to Officers, rectors, & Affiliates	Pε	ayments To Others
	Sales and fees			\$	-0-	\$	-0-
	Purchase of real estate			\$	-0-	\$	-0-
	Purchase, rental or leasing and installation of machin	nery and equipment		\$	-0-	\$	-0-
	Construction or leasing of plant buildings and facilit	ies		\$	-0-	\$	-0-
	Acquisition of other businesses (including the value may be used in exchange for the assets or securities			s	-0-	\$	-0-
	Repayment of indebtedness			\$	-0-	\$	-0-
	Working capital		🗵	\$	-0-	\$	40,000
	Other (specify): Purchase of securities of Bathgat	e Partners, LLC	⊠		-0-	\$4	1,000,000
· ·			<u></u>				
				-0-	\$	-0-	
	Column Totals		_			\$	-0-
Tot	al Payments Listed (column totals added)		🗵	<u>\$</u>	-0-	\$	4,040,000
	D.	FEDERAL SIGNATURE					
signatur	er has duly caused this notice to be signed by the unde e constitutes an undertaking by the issuer to furnish to tion furnished by the issuer to any non-accredited inve	the U.S. Securities and Exchange Commi	ission,				
Issuer	(Print or Type)	Signature			Date		
Fultor	Partners, LLC				April	, 200)7
	GF, LLC, Manager treg Fulton, its Manager	Manager			*		
		A TEPPENATORI CAN					
	Intentional misstatements or omissions o	ATTENTION f fact constitute federal criminal violati	ons. (S	See 18	U.S.C. 100	1.)	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

_		E. STATE SIGNATURE	
1.	, * * *	d), (e) or (f) presently subject to any of the disqual	•
	•	See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to fu CFR 239.500) at such times as required by state	arnish to any state administrator of any state in white law.	ich this notice is filed, a notice on Form D (17
3.	The undersigned issuer hereby undertakes to fu offerees.	urnish to the state administrators, upon written requ	uest, information furnished by the issuer to
4.		er is familiar with the conditions that must be satistich this notice is filed and understands that the issuions have been satisfied.	
	ne issuer has read this notification and knows the ally authorized person.	contents to be true and has duly caused this notice	e to be signed on its behalf by the undersigned
ī	ssuer (Print or Type)	Sign A ure	Date
E	Fulton Partners, LLC	Shep father	4/4/07
1	Name (Print or Type)	Title (Print of Type)	•
	By: GGF, LLC, Manager By: Greg Fulton, its Manager	Manager	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

Intend to sell to non-accredited investors in State (Part B-Item I)	1	2 3					5					
State Ves No		to non-	accredited rs in State	and aggregate offering price offered in state		Type of investor and amount purchased in State (Part C-Item 2)				explanation of waiver granted)		
AK AZ AR CA CO CO CT DE DC PL GA HI ID IL IN IN IA KS KY LA ME MD MA MI MM MS	State	Yes	No .		Accredited	Amount	Accredited	Amount	Yes	No		
AZ	AL											
AR CA CO CO CT	AK											
CA	AZ											
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	MN		 									
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MC	MO	1										

				<u>APPENDIX</u> 4 5							
1	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of amount pu (Part	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
MT.									•		
NE	 										
NV											
NH	· · · · · ·										
NJ											
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